

# SUMMARY FORM

## COLLECTIVE BARGAINING AGREEMENT PUBLIC SECTOR / NON-POLICE & NON-FIRE

### Section I: Agreement Details

Public Employer: Delaware Township County: Huntingdon  
Employee Organization: Teamster Local Union #469 Employees in Unit: 4  
Base Year Contract Term: 1/1/2010 12/31/2012 New Contract Term: 1/1/2013 12/31/2016  
Type of Settlement: ☒ Mediated Settlement ☐ Fact-Finder Recommendation ☐ Voluntary Settlement ☐ Super Conciliation

	Column A Base Year - Total Costs (Last Year of Previous Agreement)	Column B Next Base Year - Total Costs (First Year of Successor Agreement)
Section II: Economic		
Item 1 ..... <u>Salary</u>	\$222,728	\$222,728
Item 2 ..... <u>Increment</u>	\$0	\$4,451
Item 3 ..... <u>Longevity</u>	\$0	\$0
Item 4 ..... <u>Clothing Allowance</u>	\$1,200	\$1,940
Item 5 .....		
Item 6 .....		
Item 7 .....		
Item 8 .....		
Item 9 .....		
Item 10 .....		
Item 11 .....		
Item 12 .....		
Any additional items follow separate sheet	AMG for all items	
Section III: Totals - sum of costs in each column	\$223,928 (Total)	\$229,117 (Total)

### Section IV: Analysis of new successor agreement

#### NEW AGREEMENT ANALYSIS

Total Base Year (from A agreement) \$223,928  
Effective Date (m/d/yyyy) 1/1/2013  
Percent Increase 2.265%  
Total cost of increase \$5,191  
Total base salary (successor agreement) \$229,117

### Section V: Impact of Settlement - average annual increase over term of agreement

Percent Increase (average per year over term of agreement) 2.40  
Dollar Impact (average per year over term of agreement) \$5,168.25

### Section VI

#### Health Insurance Premium costs allocated in each Plan

	Base Year	Year 1
Cost of Health Plan .....	\$65,408	\$70,616
Employee Contributions .....	\$4,366	\$4,857
Prescription .....	\$0	\$0
Dental .....	\$0	\$0
Vision .....	\$0	\$0

The undersigned certifies that the foregoing figures are true and is aware that if any of the foregoing items are false, s/he is subject to perjury.